

HOUSING STABILITY FUNDING

APPLICATION QUESTIONS

(Note: For reference only. To apply for Housing Stability Funding, complete the online form at <https://www.york.ca/form/housing-stability-funding>)

GENERAL APPLICANT INFORMATION

Q1. Legal Name of Agency

Q2. Please provide the Applicant's charitable and/or non-profit number

Q3. Agency Head/Main Office Address: (full street or mailing address)

If the organization has office space within York Region, please provide the address

Q4. Where in York Region does your agency deliver services? Select all that apply

Q5. What is the Applicant's core purpose (Include mission statement if applicable)

Q6. On average, how many paid staff did the Applicant have over the last 12 months, regardless of full-time or part-time status?

Q7. On average, how many volunteers did the Applicant have over the last 12 months, regardless of the number of hours volunteered?

Q8. What was the Applicant's total revenue for the most recent fiscal year?

Q9. Is the Applicant currently receiving funding from York Region? Yes/No

If yes, provide the name of the funded projects or initiatives, termination date of the funding arrangement and provide a brief description of the funded services.



Q10. Agency communication contact: (This is the primary person the Region will be in contact with regarding this Application)

Name:

Title/Role:

Email:

Telephone:

Q11. Agency signatory contact: (is the person who has signing authority to legally bind the Applicant and will be responsible for signing a York Region Community Investment Fund Agreement, should the application be successful in this funding opportunity, such as the Executive Director or Chief Executive Officer), unless otherwise directed by York Region):

Name:

Title/Role:

Email:

Telephone:

FLOW-THROUGH INFORMATION – IF APPLICABLE

Q12. Legal Name of Flow-Through Agency

Q13. Flow-Through Agency Address: (full street or mailing address)

Q14. Flow-Through Agency signatory contact: (is the person who has signing authority to legally bind the Applicant and will be responsible for signing a York Region Community Investment Fund Agreement, should the application be successful in this funding opportunity (i.e., Executive Director or Chief Executive Officer), unless otherwise directed by York Region):

Name:

Title/Role:

Email:

Telephone:

PARTNERSHIPS

Q15. Will this program be designed as a partnership or a collaboration, ensuring shared responsibility/funding and meaningful engagement amongst all involved?

[Yes/No] - If yes, please complete and provide details in the collaborative application form.

STATUS OF ORGANIZATIONAL MOBILITY

Q16. Based on the descriptions outlined, please identify the stage of maturity that best reflects the Applicant's present status.

1. Idea: At this stage, a solution or vision for a community need is identified and developed, but a formal organization has not yet been established
2. Start-Up: Your organization is formally established, and is incorporated, with an active Board of Directors, etc. and initial programs and services are launched; this stage often involves a lot of enthusiasm but also significant challenges in securing funding and building infrastructure
3. Growth: Your organization is in the process of expanding programs and services, increasing its funding base and is beginning to develop more formal systems and processes, such as a shift from reliance on volunteers to hiring more paid, professional staff, upgrading technology, expanding physical space, enhancing governance structures, etc.
4. Maturity: Your organization has established itself and its programs, has stable funding and operates with well-defined systems and processes; the focus is often on maintaining stability and refining operations
5. Decline: Your organization may face challenges such as decreased funding, loss of key staff or reduced program effectiveness; this stage requires critical evaluation and strategic planning to address issues and revitalize the organization

PROJECT INFORMATION (ACTIVITIES)

Q17. Project Name

Q18. Amount requested: \$ (Limit of \$200,000 including all applicable taxes)

Q19. Which stream does your proposed project primarily align with? (Select one)

Stream One: Upstream Homelessness Prevention

Stream Two: Targeted Supports for Underserved People with Complex Needs

Q20. Please describe your project. Explain how your proposed project directly responds to actions in York Region's [2026 to 2035 Housing and Homelessness Plan](#).

Q21. Please describe your project and the housing-related needs or gaps the proposed project intends to address. If you are applying to Stream Two, please explain how the Applicant has demonstrated experience in housing stability and homelessness prevention.

a) Is it new project or an enhancement to an existing project? If the project already exists, please identify the status of current funding source(s) and explain how funding from York Region would interact with that funding source.

b) In your response, please describe how the Applicant has the necessary staffing and infrastructure to support this project and how your proposed project intersect with, support or complement existing York Region programs and services.

Where appropriate, please refer to York Region's [Plans, Reports and Strategies](#), including the [2026 to 2035 Housing and Homelessness Plan](#), the [Health and Well-Being Review](#) and the [Community Safety and Well-Being Plan](#), as well as reference to York Region [statistics and data](#), to help support the development of your application.

Q22. Provide a concise description of the key project activities and the approaches or methods you will use to achieve the intended outcomes (1000 characters).

Q23. Are there potential risks or challenges related to the successful delivery of this project? If so, describe the steps that will be taken to avoid them.

Q24. As outlined in the guidelines and to demonstrate the Applicant's past experience with housing-stability related programming, please describe any similar project(s) or program(s) completed within the past five years, if applicable.

COMMUNITY NEEDS AND TARGET POPULATION

Q25. Which priority groups will your project serve? Select all that apply

Q26. How will the Applicant ensure that project activities are relevant, safe and effective for the selected priority population(s) and how will this funding enhance your ability to serve the community or achieve greater impact?

Q27. How will the intended clientele be identified and referred to the program to maximize its reach and impact?

Q28. How many unique residents (or households) does the Applicant plan to serve by the proposed project? Unique Residents are the total number of distinct individuals served by a project, such that a client who receives services multiple times is only counted once.

Please identify the following participant counts, where applicable:

Number of low income people served through this project

Number of people experiencing homelessness served through this project

Number of people at-risk of homelessness served through this project

Number of people experiencing chronic homelessness served through this project

Number of community housing residents served through this project (who need services but may not be at risk of homelessness)

Number of program participants that receive social assistance (information to be collected for data purposes)

COMMUNITY IMPACT AND EVALUATION

Q29. How will you monitor and evaluate the progress and effectiveness of the proposed initiative?

Q30. What measurable outcomes or indicators of success do you anticipate during and after the funding term?

Consider outcomes at the applicable levels, such as client, staff, program, agency and/or York Region.

LONG-TERM SUSTAINABILITY AND CAPACITY STRENGTHENING

Q31. How will the project's impact be sustained beyond the funding period? Describe how the initiative will be maintained or integrated into ongoing operations and how monitoring and evaluation during the funding period will support learning, continuous improvement and long-term sustainability beyond 2026.